L14000096942

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Special Instructions to	Filing Officer:		
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

DIVISION OF CORPORATION

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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 23, 2015

DON NICHOLS 5831 NE 20TH TERRACE FORT LAUDERDALE, FL 33308

SUBJECT: DIN TRUST, LLC Ref. Number: L14000096942

We have received your document for DIN TRUST, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is DIN INCORPORATED N12000008492.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 115A00013196

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: DIN.TRUST, LLC	nited Liability Company	
	• • •	
DOCUMENT NUMBER: L140000	96942	
The enclosed Resignation of Registered Agent for filing.	for a Limited Liability Company and	l fee are submitted
Please return all correspondence concerning the	is matter to the following:	
Don Nichols		
Name of Person		
Name of Firm/Company		
5831 NE 20th Terrace		
Address		
Fort Lauderdale, FE 33308		
City/State and Zip Code		
ladyirene788@gmail.com E-mail address: (to be used for future annual report	t notification)	
•	·	
For further information concerning this matter,	please call:	
Don Nichols a	t (954) 771-2005	
Name of Person	Area Code Daytime Telephone Nu	mber
Enclosed is a check made payable to the Florid liability company or \$25.00 for an administrati liability company.	a Department of State for \$85.00 for vely dissolved, voluntarily dissolved	an active limited or withdrawn limited
		_≥ <u>₩</u> ज 55%
MAILING ADDRESS:	STREET ADDRESS:	
Registration Section	Registration Section	OF TAIL
Division of Corporations	Division of Corporations	所 1 8至
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	P. C. S.
1 ananassec, 1 L 52517	Tallahassee, FL 32301	STAT RATION I: QUANTIE SAIDA

INHS17 (2/14)

ARTICLES OF AMENDMENT TO ' ARTICLES OF ORGANIZATION OF

DIN TRUST,	LLC					
(Name of the Limited (A	Liability Compar Florida Limited L	ny as it now appears o liability Company)	n our records.)			
The Articles of Organization for this Limited Liab				4 and ass	ign ල් රු	
Norida document number <u>L14000096942</u> .						
This amendment is submitted to amend the follow	ring;			L-7 ETARY HASSEE	FILH ETARY FOR CC	
A. If amending name, enter the new name of the	<u>ne limited liabi</u>	lity company here	:		263C	
PFNFFG :	DN4I-N	LLC			S IA)RA	
The new name must be distinguishable and contain the word	ls "Limited Liabili	ty Company," the desig	nation "LLC" or the	abbreviation T.	.L.C	
Enter new principal offices address, if applicab	le:	5831 NE_20±	h Terrace			
(Principal office address MUST BE A STREET	ADDRESS)	Fort Lauder		308		
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BO	<u>(X)</u>					
B. If amending the registered agent and/or registered agent and/or the new registered offic			ır records, <u>ente</u> ı	the name	of the nev	
	o detail only life o	•				
NU Change - SAMe Name of New Registered Agent:	Don Nich	ols			• • • • • • • • • • • • • • • • • • • •	
New Registered Office Address:	5831 NE	20th Terrace				
		Enter Florida	street address			
	Fort Lau	derdale	, Florida _	33308		
		City		Zip Code		

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

D. If an	ending any other information, ent	ter change(s) here: (Attach additional :	sheets, if necessary.)

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(If an e <u>Note</u> docu	If the date inserted in this block does in the Department on the Department	ic and cannot be prior to date of filing or more the not meet the applicable statutory filing requ	airements, this date will not be listed as the
(b) Th	e 90th day after the record is file	led.	at 12.01 a.m. on the earner of.
Dated	6-19-2015	.,	BEC 15 SEC
	Signature	of a member or authorized representative of a n	nember HASS
	DON	Typed or printed name of signce	T CORPO
		Typed or printed name of signee	STATE 11: 04 STATE LOAIDA
		Page 3 of 3	

Page 3 of 3

Filing Fee: \$25.00